



# Public Notice

## ND Medicaid Program

There will be no Medicaid Provider Inflation on July 1, 2018. This is effective for both Medicaid State Plan Services and Medicaid 1915(c) Waiver services. There will also be no inflationary increases on January 1, 2019 for Nursing Facilities and Psychiatric Residential Treatment Facilities.

Consistent with Medicaid State Plan Authority, for services paid from the North Dakota Professional Services Fee Schedule, Medicaid will pay the lower of billed charges or fee schedule established by the state agency. The posted fee schedule, effective for dates of service on or after July 1, 2018, accounts for annual cost neutral adjustments to the North Dakota Medicaid conversion factor made to reflect updates to the Medicare RVUs and utilization changes. The Medical Services Division continues annual review of Medicaid fee schedules; and this review results in codes previously maintained on separate fee schedules to be moved to have fees established using the Medicare Resource Based Relative Value Scale pricing methodology.

In accordance with state plan authority, effective for dates of service on or after July 1, 2018, the rate paid for non-commercial, passenger vehicle non-emergency medical transportation mileage will be adjusted to reflect limits established by the North Dakota Legislature. The adjustment is expected to have a minimal fiscal impact.

In accordance with state plan authority, payment for governmental clinic services and government-provided rehabilitative services is based on the cost of delivery of the service. Effective for dates of service on or after July 1, 2018 dates of service, it is estimated the cost of delivery of the services is expected to increase by no more than 1.9%, in the aggregate. This is estimated to cost approximately \$1.4 million for the 12 month period.

ND Medicaid follows the National Correct Coding Initiative (NCCI) Edits. These edits were developed by the Centers for Medicare and Medicaid Services (CMS) based on coding conventions defined in the American Medical Association's Correct Procedure Terminology Manual, national and local policies and edits, coding guidelines developed by national societies, analysis of standard medical and surgical practices, and a review of current coding practices. CMS annually updates the National Correct Coding Initiative Coding Policy Manual.

Effective on or after July 1, 2018, in accordance with existing Medicaid state plan authority, annual cost information will be collected from dental clinic providers. This is estimated to have a minimal fiscal impact.

The supplemental payment for State Fiscal Year 2019 will be continued for critical access hospitals; the estimated cost is \$1 million for the 12-month period.

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The capitated monthly rate for Medicaid Expansion, effective July 1, 2018, is estimated to increase, based on actuarial certification of the rates and Sanford Health Plan acceptance of those rates, and is expected to have a minimal fiscal impact.

Fee schedules for services are on the Department of Human Services website at:

<http://www.nd.gov/dhs/services/medicalserv/medicaid/provider-fee-schedules.html>

Comments can be sent to and viewed at: Medical Services Division Room 309, ND Department of Human Services, 600 E Boulevard Ave Dept 325, Bismarck, ND 58505-0250. Questions may be directed to the local county social service office, or individuals may contact the ND Medicaid Program at 1-800-755-2604.

Date posted: June 15, 2018